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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|--------------------------------------------------------------------|---------|-------------|
| No. <b>C 12446</b>                                                                                                                                     |                 | <b>Due no later than Jul 31, 2012</b>                                                                                                                                                 |          | 2. Registered Agent and Address <b>(NO PO BOX)</b>                 |         |             |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                 | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br>FRANKLIN CUB RIVER PUMPING COMPANY<br>MAXINE WADDOUPS<br>PO BOX 311<br>PRESTON ID 83263 |          | LARRELL G. HOBBS<br>3384 SOUTH PARKINSON ROAD<br>FRANKLIN ID 83237 |         |             |
|                                                                                                                                                        |                 |                                                                                                                                                                                       |          | 3. <u>New</u> Registered Agent Signature:*                         |         |             |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                 |                                                                                                                                                                                       |          |                                                                    |         |             |
| Office Held                                                                                                                                            | Name            | Street or PO Address                                                                                                                                                                  | City     | State                                                              | Country | Postal Code |
| SECRETARY                                                                                                                                              | MAXINE WADDOUPS | P.O. BOX 311                                                                                                                                                                          | PRESTON  | ID                                                                 | USA     | 83263       |
| DIRECTOR                                                                                                                                               | SHERMAN OLSON   | 5935 SOUTH 2100 WEST                                                                                                                                                                  | ROY      | UT                                                                 | USA     | 84067       |
| DIRECTOR                                                                                                                                               | CLETUS HAMILTON | P.O. BOX 461196                                                                                                                                                                       | LEEDS    | UT                                                                 | USA     | 84746       |
| DIRECTOR                                                                                                                                               | LARRELL HOBBS   | 3384 SOUTH PARKINSON ROAD                                                                                                                                                             | FRANKLIN | ID                                                                 | USA     | 83237       |
| PRESIDENT                                                                                                                                              | CHRIS ALLEN     | 12616 NORTH 1200 EAST                                                                                                                                                                 | COVE     | UT                                                                 | USA     | 84320       |
| DIRECTOR                                                                                                                                               | TROY HOBBS      | 3384 SOUTH PARKINSON RD                                                                                                                                                               | FRANKLIN | ID                                                                 | USA     | 83237       |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 12446</b>                                                                                           |                 | 6. Annual Report must be signed.*<br>Signature: Maxine Waddoups<br>Name (type or print): Maxine Waddoups                                                                              |          | Date: 08/09/2012<br>Title: Secretary                               |         |             |
| Processed 08/09/2012                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                                                             |          |                                                                    |         |             |